## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10813599

| CLAIMS AS FILED - PART I                                     |   |   |                     |   |                              |                                   |        | SMALL ENTITY       |                        |         | OTHER THAN          |                        |  |
|--|---|---|---------------------|---|------------------------------|-----------------------------------|--------|--------------------|------------------------|---------|---------------------|------------------------|--|
|  |   |   | (Column 1)          |   | (Column 2)                   |                                   | Ţ      | TYPE               |                        | OR      | SMALL               | ENTITY                 |  |
| TOTAL CLAIMS   |   |   |                     |   |                              |                                   |        | RATE               | FEE                    |         | RATE                | FEE                    |  |
| FOR  |   |   | NUMBER FILED        |   | NUMBI                        | ER EXTRA                          |        | BASIC FEE          | 385.00                 | OR      | BASIC FEE           | 770.00                 |  |
| то   | TAL CHARGEA   | BLE CLAIMS                                  | <b>30</b> minus 20= |   | *                            |                                   |        | X\$ 9=             |                        | OR      | X\$18=              |                        |  |
| IND  | EPENDENT CL   | AIMS  | 3 minus 3 =         |   | *                            |                                   |        | X43=               |                        | OR      | X86=                |                        |  |
| MULTIPLE DEPENDENT CLAIM PRESENT                             |   |   |                     |   |                              |                                   |        | +145=              |                        | OR      | +290=               |                        |  |
| * If the difference in column 1 is less than zero, enter "   |   |   |                     |   | "0" in c                     | olumn 2                           | L      | TOTAL              |                        | OR      | TOTAL               | 770                    |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) |   |   |                     |   |                              |                                   |        | SMALL E            | ENTITY                 | OR      | OTHER<br>SMALL I    |                        |  |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                     | HIGH<br>NUM<br>PREVIO<br>PAID           | BER<br>OUSLY                 | PRESENT<br>EXTRA                  |        | RATE               | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total   | *   | Minus               | **                                      |                              | =                                 |        | X\$ 9=             |                        | OR      | X\$18=              |                        |  |
|  | Independent   | *   | Minus               | ***                                     |                              | =                                 |        | X43=               |                        | OR      | X86=                |                        |  |
|  | FIRST PRESE   | NTATION OF M                                | JLTIPLE DEF         | PENDENT                                 | CLAIM                        |                                   |        | +145=              |                        | OR      | +290=               |                        |  |
|  |   |   |                     |   |                              |                                   |        | TOTAL<br>DDIT. FEE |                        | اما     | TOTAL<br>ADDIT. FEE |                        |  |
|  |   |   | ODN. FEE (          |   | •                            |                                   |        |                    |                        |         |                     |                        |  |
| AMENDMENT B  |   | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                     | (Colui<br>HIGH<br>NUM<br>PREVIO<br>PAID | IEST<br>BER<br>OUSLY         | PRESENT<br>EXTRA                  |        | RATE               | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total   | *   | Minus               | **                                      |                              | = ,.                              |        | X\$ 9=             |                        | OR      | X\$18=              |                        |  |
|  | Independent   | *   | Minus               | ***                                     |                              | =                                 |        | X43=               |                        | OR      | X86=                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |   |   |                     |   |                              |                                   |        | +145=              | -                      | OR      | +290=               |                        |  |
| TOTAL<br>ADDIT. FEE  |   |   |                     |   |                              |                                   |        |                    |                        | OR      | TOTAL<br>ADDIT. FEE |                        |  |
| (Column 1) (Column 2) (Column 3)                             |   |   |                     |   |                              |                                   |        |                    |                        |         |                     |                        |  |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                     | HIGH<br>NUM<br>PREVI                    | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                  |        | RATE               | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total   | *   | Minus               | **                                      |                              | =                                 |        | X\$ 9=             |                        | OR      | X\$18=              |                        |  |
| ME   | Independent   | *   | Minus               | ***                                     |                              | =                                 |        | X43=               |                        | ΟR      | X86=                |                        |  |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                     |   |                              |                                   |        | +145=              |                        | OR      | +290=               |                        |  |
| **   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |   |                     |   |                              |                                   |        |                    |                        |         |                     |                        |  |
| ***  | If the "Highest Nu  | mber Previously P                           | ald For" IN TH      | IS SPACE                                | is less tha                  | an 3, enter "3.<br>Shighest numbe | er fou | nd in the an       | propriate ho           | x in co | lumn 1.             |                        |  |